

AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No. BAH-25-337

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* Erek L. Barron, U.S. Attorney for the
was received by me on *(date)* 02/07/2025 . District of Maryland

☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____ ; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____ , and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____ , who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____ ; or

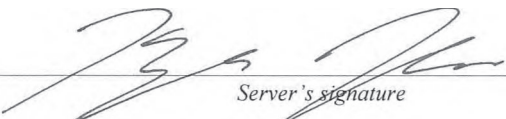
☐ I returned the summons unexecuted because _____ ; or

☒ Other *(specify)*: Certified U.S. Mail, Postage Prepaid, Return Receipt Requested
Delivered on 2/10/2025

My fees are \$ 0.00 for travel and \$ 0.00 for services, for a total of \$ 0.00 .

I declare under penalty of perjury that this information is true.

Date: 03/05/2025



Server's signature

Kenyon North, Jr. Paralegal

Printed name and title

Jenner & Block LLP
1099 New York Ave., NW, Ste. 900
Washington, D.C. 20001

Server's address

Additional information regarding attempted service, etc:

7018 1830 0002 1706 6392

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Domestic Mail Only
For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

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☐ Adult Signature Restricted Delivery \$
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Total Postage and Fees \$

Erek L. Barron
United States Attorney for the District of Maryland
36 S. Charles Street, 4th Fl.
Baltimore, MD 21201
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none">■ Complete items 1, 2, and 3.■ Print your name and address on the reverse so that we can return the card to you.■ Attach this card to the back of the mailpiece, or on the front if space permits.	<p>A. Signature X <i>Erek L. Barron</i></p> <p>B. Received by (Printed Name) <i>Kenneth E. Barron</i></p> <p>C. Date <i>3/10/25</i></p> <p>D. Is delivery address different from item 1? If YES, enter delivery address below:</p>																
<p>1. Article Addressed to: Erek L. Barron United States Attorney for the District of Maryland 36 S. Charles Street, 4th Fl. Baltimore, MD 21201</p>																	
<p>Barcode: 9590 9402 4801 8344 9858 37</p>																	
<p>2. Article Number (Transfer from service label) 7018 1830 0002 1706 6392</p>	<p>3. Service Type</p> <table border="0"><tr><td><input type="checkbox"/> Adult Signature</td><td><input type="checkbox"/> Priority Mail</td></tr><tr><td><input type="checkbox"/> Adult Signature Restricted Delivery</td><td><input type="checkbox"/> Registered</td></tr><tr><td><input type="checkbox"/> Certified Mail®</td><td><input type="checkbox"/> Registered Delivery</td></tr><tr><td><input type="checkbox"/> Certified Mail Restricted Delivery</td><td><input type="checkbox"/> Return Receipt</td></tr><tr><td><input type="checkbox"/> Collect on Delivery</td><td><input type="checkbox"/> Merchandise</td></tr><tr><td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td><td><input type="checkbox"/> Signature Co</td></tr><tr><td><input type="checkbox"/> Insured Mail</td><td><input type="checkbox"/> Signature Cc</td></tr><tr><td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td><td><input type="checkbox"/> Restricted D</td></tr></table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Merchandise	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Co	<input type="checkbox"/> Insured Mail	<input type="checkbox"/> Signature Cc	<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	<input type="checkbox"/> Restricted D
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